



July 2, 2003

Mayor Seng and City Council City of Lincoln City County Building Lincoln, NE

Mayor Seng and Members of the City Council:

An investigation has been made regarding the application of Carlos O'Kelly's Inc, d.b.a. Carlos O'Kelly's Mexican Cafe, 3130 Pine Lake Road requesting a class I liquor license.

Carlos O'Kelly's has requested that Jeromey Balaun be approved as the manager of the liquor license.

Background information on the applicants is as follows:

Jeromey Balaun was born in Salina, Kansas. He attended Chaparral High School, Las Vegas, Nevada graduating in 1991. Jeromey Balaun has been employed by Carlos O'Kelly's since 1994.

If this application is approved, it should be with the understanding that it conforms to all the rules and regulations of Lincoln, Lancaster County and the State of Nebraska.

THOMAS K. CASADY, Chief of Police





# Liquor License Investigation

Business (DBA) CARlos O'Kelly's
Manager Owner Other
Name: JEROMEY BALAUN
US Citizen? Yes No
Has applicant ever been cited for liquor law violations?  No Yes Explain
Does applicant have an interest in another liquor license? No Yes  Explain
Is spouse qualified to hold a license ? Yes No N/A
How is applicant if not an owner to be paid? (Salary) Hourly
How many hours will applicant be at the establishment?
Any other employment ? No Yes, explain
Any previous experience with a liquor license? (Yes) No
Any criminal convictions? No Yes  Comments BAZ Check 1994 Fines & PROBATION
Is applicant a property owner in Lincoln? Yes No
Is applicant involved in any civil litigation? No Yes  Comments
(4) Photo (4) Records Check (4) References
Comments
Interview Date 7 / 2 / 03

# STATE OF NEBRASKA

PH: 7-14-03



Mike Johanns Governor N3-072396 178 NEBRASKA LIQUOR CONTROL COMMISSION Forrest D. Chapman

Executive Director

301 Centennial Mall South, 5th Floor P.O. Box 95046

Lincoln, Nebraska 68509-5046 Phone (402) 471-2571

Fax (402) 471-2814 TRS USER 800 833-7352 (TTY)

web address: http://www.nol.org/home/NLCC/

June 25, 2003

Office of the City Clerk 555 So 10<sup>th</sup> St, Suite #103 Lincoln NE 68508

Dear Local Governing Body:

Carlos O'Kellin Inc dba Carlos Cokellin Mexican Class I 3130 Fine Lake Rd 68516

Attached is the form to be used on all retail liquor license applications. Local clerks must collect proper license fees and occupation tax per ordinance, if any, before delivering the license at time of issuance.

# TWO KEY TIME FRAMES TO KEEP IN MIND ARE:

You have 45 days to conduct a hearing after the date of receipt of the notice from this Commission (§53-134).
 You may choose NOT to make a recommendation of approval or denial to our Commission.

PER  $\S53-133$ , THE LIQUOR CONTROL COMMISSION SHALL SET FOR HEARING ANY APPLICATION WHEREIN:

- There is a recommendation of denial from the local governing body.
- 2) A citizens protest; or
- Statutory problems that the Commission discovers.

PLEASE NOTE...A LICENSEE MUST BE "PROPERLY" LICENSED IN ORDER TO PURCHASE FROM WHOLESALERS; AND, A LICENSE IS EFFECTIVE:

- Upon payment of the license fees;
- Physical possession of the license:
- 3) Effective date on the license

Sincerely,

NEBRASKA LIQUOR CONTROL COMMISSION

Mary Messman Licensing Division

Enclosures

Rhonda R. Flower Commissioner

Bob Logsdon Chairman

R.L. (Dick) Coyne Commissioner

An Equal Opportunity/Affirmative Action Employer

FORM 35-4001 REV. 12/99

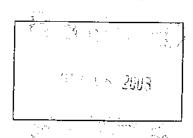
Printed with say ink on recycled paper

APPLICATION FOR LICENSE

Nebraska Liquor Control Commission PO Box 95046, 301 Centennial Mall South Lincoln, NE 68509-5046 S New

http://www.nol.org/home/NLCC/

Phone: (402) 471-2571 Fax: (402) 471-2814



INSTRUCTIONS: Include: 1. Applicable fees payable to Liquor Control Commission 2. Copy of birth certificate or naturalization papers proving U.S. citizenship for each individual and spouse named on application (not required of corporations or spouse(s) who file an affidavit of no interest with application, Commission form 4178 3. Corporations must include copy of articles of incorporation as filed with the Secretary of States office in the state of Nebraska 4. Commission checklist, form 4251 5. Fingerprint cards and processing fees (are required of individuals, all partners and spouses. Corporate applicants must file for CEO/Manager & stockholders holding over 25% stock 6. All applications must be typewritten or printed clearly 7. Submit in Triplicate 8. Required areas marked by a red asterisk (\*

CLASS OF LICENSE FOR WHICH APPLICATION IS M			60053
Class of License (Check applicable class) *	Registration Fee	License Fees	Surety Bond *send copy
A Beer, On Sale Only - Inside Corporate Limits	\$45.00	Collected a Local Level	exempt
F Reer, On Sale Only - Outside Corporate Limits	\$45.00	Collected at Local Level	exempt
Beer, Off Sale Only - Inside/Outside Corporate Limits	\$45.00	Collected at Local Level	exempt
J Wine, Beer, On Sale Only - Inside Corporate Limits	\$45.00	Collected at Local Level	exempt
1 Spirits, Wine, Beer, On Sale Only - Inside Corporate Limits	\$45.00	Collected at Local Level	exempt
D Spirits, Wine, Beer, Off Sale Only - Inside Corporate Limits	\$45.00	\$150.00	exempt
D1 Spirits, Wine, Beer, Off Sale Only - within extraterritorial zoning jurisdiction	\$45.00	\$150.00	exempt
C Spirits, Wine, Beer On & Off Sale - Inside Corporate Limits	\$45.00	Collected at Local Level	exempt
M Bottle Club (Spirits, Wine, Beer, On Sale)	\$45.00	Collected at Local Level	exempt
T H Nonprofit Corporation	\$45.00	Collected at Local Level	exempt
K Wine Only, Off Sale	\$45.00	Collected at Local Level	exempt
□ O Boat	\$45.00	\$50.00	exempt
V Manufacturer of Beer, Wine & Distilled Spirits	\$45.00	Varies \$100 to \$1,000	*\$10,000 min.
T X Wholesale Liquor	\$45.00	\$500.00	*\$ 5,000 min.
T w Wholesale Beer	\$45.00	\$250.00	*\$ 5,000 min.
Y Farm Winery	\$45.00	\$250.00	*\$ 1,000 min.
L Craft Brewery (Brew Pub)	\$45.00	\$250.00	*\$ 1,000 min.

http://www.nol.org/home/NLCC/35-4010.html

di #45 2905

6/17/2003

TYPE OF APPLICATION *	NAME OF PERSON ASSISTING WI	TH APPLICATION
Type of application being applied for (check appropriate box)  1. C Individual License requires Form 1 to be attached.  2. C Partnership License requires Form 2 to be attached.  3. Corporate License requires Forms 3 and Manager Application to be attached	Name Firm Name Address	TH APPLICATION
attacheu		

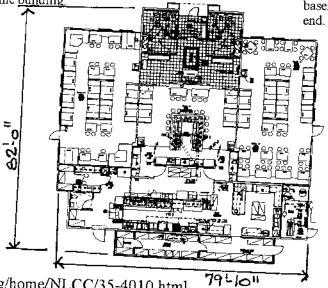
SE	CTION A – LOCATION INFOR	MATION - Must be completed by all applicants
Trade Name (name	e of business) y's Mexican Cafe	Telephone Number at premise to be licensed
1) Street Address of	of Proposed licensed premise	2) Mailing Address for receipt of Liquor Control Commission mailings
City Lincoln Zip Code 68516	Lancaster  Is this located inside the earth of the Yes C No	City Wichira County  Sedgwick  Sip Code  67206

# DESCRIPTION AND DIAGRAM OF THE STRUCTURE TO BE LICENSED

In the space provided draw the area to be licensed. This should include storage areas, basement, sales areas and areas where consumption or sales of alcohol will take place. If only a portion of the building is to be covered by the license, you must still include dimensions (length x width) of the licensed area as well as the dimensions of the entire building in situations where only a portion of the entire bldg. is to be covered by the license. No Example: East portion approximately 50' x blue prints will be accepted. Be sure to indicate the direction North and number of floors of the building

×

100' of main floor of 3 story building plus basement. Approximately 30' x 50' at the East



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http://www.nol.org/home/NLCC/35-4010.html

6/17/2003

SECTION B OTHER INFO			N
	Yes	No	Explanation/Comments Note: Only what is visible on screen will be printed
* 1. READ CAREFULLY. Answer completely and accurately.  Has anyone who is a party to this application, or their spouse, ever been convicted of or plead guilty to any criminal charge. Criminal charge means any charge alleging a felony or misdemeanor violation of a federal or state law; or a violation of a local law, ordinance or resolution. Include any DWIs or DUIs. List the nature of the charge, where the charge occurred and the year and month of the conviction or plea. Also list any	Yes	No •	
charges pending at the time of this application. If more than one party, please list charges by each individual's name.  * 2. Are you buying the business and/or assets of a licensee? If			
yes, submit a copy of the sales agreement with a listing of assets being acquired including liquor inventory (name brand and container size required).	Yes	No •	
* 3. Are you filing a temporary agency agreement, Commission form 4231, whereby current licensee allows you to operate on their license? If yes, attach copy.	Yes	No •	ے
* 4. Are you borrowing any money from any source to establish and/or operate the business? If yes, list the lender.	Yes C	No •	
	Yes	_ 11	<u>.</u>
a share of the profits of the establishment? If yes, explain.		•	الت

	<del></del>
* 6. Will any of the furniture, fixtures and equipment to be used in this business be owned by others? If yes, list such item and the owner.	Yes No
* 7. Will any person(s) other than named in this application have any direct or indirect ownership or control of the business? If yes, explain?	Yes No
* 8. Are the premises to be licensed within 150 ft. of a church, school, hospital, home for the aged or indigent persons or for veterans, their wives, children, or within 300 ft. of a college or university campus? If yes, list the name of such institution and where it is located in relation to the premises. Per Sec. §53-177.	Yes No
* 9. Is anyone listed on this application a law enforcement officer? If yes, list the person, the law enforcement agency involved and the persons exact duties.	Yes No
10. List the primary bank and/or financial institution (branch if applicable) to be utilized by the business and the person(s) who will be authorized to write checks and/or make withdrawals on accounts at such institutions.	Union Bank & Trust P.O. Box 82535 Lincoln, NE 68501 Paul Schwarz David Rolph
11. List all past and present liquor licenses held by any person named in this application. Include license holder name, location of license and license number. Also list reasons for termination of any licenses previously held.	See attached
12. List the person who will be the on site supervisor of the business and the estimated number of hours per week such person or manager will be on the premises supervising operations.	Jeromey Bolaun  50-60 hrs. per week

13. List the training and experience of the pers above in connection with selling and/or serving products.	on listed in #12 g alcohol	14	years with Carlos O'Kelly's -
14. If the property for which this license is sour submit a copy of the deed, or proof of ownersh submit a copy of the lease covering the entire I (Documents must show title or lease held interapplicant as owner or lessee in the individual(s name for which the application is being filed)	ip, if leased icense year. est in name of	SEE A	TTACHED LEASE
15. When do you intend to open for business?		July	21, 2002 =1
16. List the principal residence for the past 10 y separate sheet.	years for all person	ns required to si	ign application. If necessary attach a
NAME	FROM (YEAR)	TO (YEAR)	RESIDENCE (CITY, STATE)
Dowid K. Rolph	1990	present	Wichita, Ks
Darra L. Rolph	2001	present	Punta Gorda, FL
Durid L. Rolph	072	2001	Wiehita, KS

The undersigned applicant(s) hereby consent(s) to a background investigation and release of present & future records of every kind and description including police records, tax records (State and Federal), bank or lending institution records, and said applicant(s) and spouse(s) waive(s) any right or causes of action that said applicant(s) or spouse(s) may have against the Nebraska Liquor Control Commission, the Nebraska State Patrol, and any other individual disclosing or releasing said information. Any documents or records for the proposed business or for any partner or stockholder that are needed in furtherance of the application investigation or any other investigation shall be supplied immediately upon demand to the Nebraska Liquor Control Commission or the Nebraska State Patrol. The undersigned understand and acknowledge that any license issued, based on the information submitted in this application, is subject to cancellation if the information contained herein is incomplete and/or inaccurate.

Individual applicants agree to supervise in person the management and operation of the business and that they will operate the business authorized by the license for themselves and not as an agent for any other person or entity. Corporate applicants agree the approved manager will superintend in person the management and operation of the business. Partnership applicants agree one partner shall superintend the management and operation of the business. All applicants agree to operate the licensed business within all applicable laws, rules, regulations, and ordinances and to cooperate fully with any authorized agent of the Nebraska Liquor Control Commission.

Must be signed in the presence of a notary public. Must be signed by applicant and spouse; if a partnership, all partners and spouses must sign and corporation, all stockholders (holding more than 25% of the stock), officers, directors and spouses must sign. Full names only, initials not acceptable.

Sign here Dantkashl	Sign Barber X	W. enh
Sign Here Mull Roll	Barbara Rolph Sign Here Owne C P	led
Sign Here Paul E. Schwarz	Diane C. Rolph Sign Here Mary Schu Mary Of Schwarz	vary
Sign Heret	Sign Here	<del>.</del>
Subscribed in my presence and sworn to before me this	/7 day of June (SEAL)	2003
STATE OF KANSAS  My Appt Exp. 03-17-06		11191 1 1 <b>2003</b>
In compliance with ADA, this application for license form is available in other formats for persons with disabilities. A ten day advance period is requested in writing to produce the alternative format.	Sign here the Notary Publ	. Saw lic Signature
Veri	fy & Print form	
		FORM 35-4010

**REV 1/01** 

# Corporation/LLC Application for License - Form 3

Nebraska Liquor Control Commission

# INSTRUCTIONS:

- 1) Application and application for manager must be typewritten and submitted in triplicate
- 2) Fingerprint cards (2 cards per person) must be submitted for: a) each stockholder owning over 25% of the stock, b) chief executive officer, c) proposed manager and d) all spouses
- 3) Information regarding spouses must be completed



Name of Corporation That Will Hold License. Attach copy of Articles of Incorporation	Articles of Incorpo	ration		Total	Total Number of Shares (if corporation)	res (if corp	poration)	
Carlos O'Kelly's, Inc.				<u> </u>	30,000			
Corporate Street Address (1)		Mailing address for receipt of Liquor Control Commission N	Mailing address for receipt of Liquor Control Commission Mailings	ilings		Согрога	Corporate Telephone Number	
1877 N. Rock Road		1877 N.	1877 N. Rock Road			316.	316-683-2611	
City	County		State			Zip Code	de	
Wichita	Sedgwick		KS	:		67206	06	
Name of Registered Agent		Name of F	Name of Proposed Manager	ī				
Russ Liggett		Jero	Jeromey Balaun					
IN THIS SECTIO	IN THIS SECTION LIST THE NAME OF THE CHIEF EXECUTIVE OF	E OF THE CH	IEF EXECUTE		FICER			
Name		Title			Date of Birth		Social Security Number	4
David K. Rolph		President	ent			<b>,</b>		L <u>.,.                                   </u>
Home Address (1)				į		State	:	
8939 Boxthorn Ct.						ΧS		
City		State	Zip Code	1	Home Telephone Number	ne Numbe	÷	
Wichita		KS	67226		316-683-2611	3-2611		

# Corporation/LLC Application for License - Form 3 Nebraska Liquor Control Commission

In Compliance with ADA, this form is available in other formats for persons with disabilities.  A ten day advance period is requested in writing to produce the alternate format	STATE OF KANSAS  NOTARY PUBLIC  STATE OF KANSAS  MY APPT. EXPIRES 8/7-03  GLENDA A. PETERSON  NOTARY PUBLIC  BY SWITCH SEPTEMBER	Sedger, ck County ) ss.	STATE OF Verses	Please indicate below your corporate tax year with the IRS  Starting Date: 1/01 Ending Date: 12/31/	If YES, LIST EACH STOCKHOLDER/MEMBER OWNING MORE THAN 25% stock/interest in that corporation/LLC. Any applicant who has a Corporation as a shareholder MUST file an organizational chart listing all shareholders and/or corporations owning more than 25% stock and listing of the percentage of stock owned		Name of Control Corporation	is this Corporation/LLC controlled by another Corporation? D YES & NO
--	--	-------------------------	-----------------	---	---	--	-----------------------------	---

FORM 35-4183 Page 3 REV 02/01

Application for Corporate Manager
\*Must Be A Nebraska Resident\*
Please submit in Triplicate

Return to:	Nebraska Liquor Contro 301 Centennial Mail So.,	ol Commission, PO Box 9504 Lincoln NE 68509	6	
Phone: (402) 47	71-2571 F	ax: (402) 471-2814	Web address: http://www.nol.or	g/home/NLCC/
Required areas r	narked by a red asterisk ( *	)		
		LIQUOR LI	CENSE INFORMATION	
<del></del>	sed Corporation		Class & Licens	e number
Corles	Okellys In	*	Class I	*
	Licensed Premise	arian Cafe *		
	of Licensed Premise New Lake React	* City	2ip Code * 68516	* Lawcaster
On behalf of the	corporation, I designate this	s individual as corporate mana	ger.	
Signature of (	Corporate President/CE		Prend &	
<u> </u>		APPLICANT INFORM	ATION (MUST BE 21 OR OVER	R)
	First, Middle, Maiden)	dall *	Sex * F M	Social Security Number
Date of Birth	*	Place of Birth Saling, Kaws	rs *	
Home Street Add		*	City Linceln •	Loncaster .
State *	Zip [J.	Code       3521 *	Home Telephone Number	r
Business Telepho				Drivers License Number S
Are You Marri	icd?* Yes • No	If Yes, You must complete	the following:	
	SPOU	SE'S INFORMATION		

		First, Middle, Maiden)	`1Ë		Social Security Number
Drive	ns Licenso	Number		State NE	Date of Birth
Place of		a, Kansas			
any crin a federa charge, charges	one who initial char if or state the where the pending a	law; or a violation of a lo charge occurred and the the time of this applica	ion, or their s ins any charg ocal law, ordi year and mo tion. If more	pouse, <u>ever</u> been of e alleging a felony mance or resolution on the conviction than one party, pla	
* 2 Hav		<del></del>	<del></del>	<u> </u>	
license? Yes	IF YES, f	or what premise give lice	ense number	any liquor license	or manager for any liquor
* 3. Have		OHE STOLISE AVAF mode a			
Yes	No 🔹	our spouse ever made a d		settlement for viol	ation of such laws?
THEM ASKA	Didnot Di	nanager, have all the qual icense? ontrol Act (§53-131.01)	lifications rec	paired by any person	on entitled to hold a
Yes	No C				
* 5. Have with this a	you filed pplication	fingerprint cards and PR	OPER FEE	S (if check, make	out to the NE State Patrol),
Yes	No C				

RESIDENCES FOR THE PAST 10 YEARS, APPLICANT AND SPOUSE MUST COMPLETE	
Year	
From To	
Applicant: City & State	
Teriney Below, Saling, Kourses 1993 1998	
Spouse: City & State	
Salina, Konsas 1993 1998	
Year	
From To	
Applicant: City & State	
himoln, Nebroska 1998 2000	
Spouse: City & State	
Lincoln, Nebraska 1998 Dece	
Year	
From To	
Applicant: City & State	
Grand Tshird, Mebrisky 2000 2003	
Spouse: City & State  Grand Testurd, Nebras Ka 2003	
1 0.000 2800 1 16000 Pd 1200	
Year	
From To  Applicant: City & State	
Lincoln, Nebroska [2023 2023	
Spouse: City & State	
Lincoln, Nebraska Das 2003	
per	
EMPLOYERS - LIST LAST TWO EMPLOYERS	
DAR DO I DRS - DIST LAST I WO EMPLOYERS	
Year Name of Employer From To	
Michael Tedd Balanin 1990 1992	
Name of Supervisor Telephone Number	
Michael Redd Bakum (102)568-1570	
http://www.nol.org/home/NLCC/35-4013.htm	

l	
Nlama of F	Year
B.J. Keetingy Inc	From To 1994
Name of Supervisor	Telephone Number
Richard Keetling	(705) 823-8580
L	
	F INVESTIGATION - MUST BE SIGNED BY
APPLICA	ANT & SPOUSE
CTATE AT MEDDACIA	
STATE OF NEBRASKA ) ) SS	
COUNTY OF )	
<ul> <li>applicant and/or spouse of applicant who makes</li> <li>application has been read and that the contents the</li> </ul>	nereof and all statements contained therein are true. If epication, the applicant(s) shall be deemed guilty of
or lending institution records, and said applicant said applicant or spouse may have against the Ne	police records, tax records (State and Federal), and bank and spouse waive any rights or causes of action that ebraska Liquor Control Commission and any other on to the Nebraska Liquor Control Commission. If
The undersigned understand and acknowledge th submitted in this application, is subject to cancell and inaccurate.	nat any license issued, based on the information lation if the information contained herein is incomplete
<del></del>	
Signature of Applicant	Miles fell allen Signature of Spouse
Subscribed in my presence and sworn to before me this 10th day of June 2003	Subscribed in my presence and sworp to before me this 10th day of 50 method 2003.
M. HOUSEY - Bads of Horrison PR-EAN-HOOM SANS-ORD My Caree, Day Jone 16, 2007	me this 10th day of June 10th 10th 10th 10th 10th 10th 10th 10th

Verify and Print

# NEBRASKA LIQUOR CONTROL COMMISSION ... 19 (20) AFFIDAVIT OF NON PARTICIPATION

The undersigned individual acknowledges that he/she will have no interest, directly or indirectly, in the operation or profit of the business, as prescribed in Section §53.125(13) of the Liquor Control Act. Such individual shall not tend bar, make sales, serve patrons, stock shelves, write checks, sign invoices, represent themselves as owner or in any way participate in the day to day operations in any capacity. Undersigned will also be waived of filing fingerprint cards, however, has disclosed any violation(s) on the application.

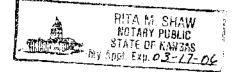


Signature of Notary Public

The licensee/applicant understands that he/she is responsible for compliance with the conditions set out above, and that if such terms are violated, the Commission may cancel or revoke the license.

Print Name of Licensee/Applicant

 $\ensuremath{\mathrm{SUBSCRIBED}}$  in my presence and sworn to before me this  $\underline{\ \ }$ 



Signature of Notary Public

FORM 35-4178 REV 2/01

# NEBRASKA LIQUOR CONTROL COMMISSION AFFIDAVIT OF NON PARTICIPATION

··· · · · · · · · · 2003

The undersigned individual acknowledges that he/she will have no interest, directly or indirectly, in the operation or profit of the business, as prescribed in Section §53.125(13) of the Liquor Control Act. Such individual shall not tend bar, make sales, serve patrons, stock shelves, write checks, sign invoices, represent themselves as owner or in any way participate in the day to day operations in any capacity. Undersigned will also be waived of filing fingerprint cards, however, has disclosed any violation(s) on the application.

Signature of Spouse

MY APPT. EXPIRES

The licensee/applicant understands that he/she is responsible for compliance with the conditions set out above, and that if such terms are violated, the Commission may cancel or revoke the license.

Signature of Censee/Applicant

David K. Rolch

Print Name of Licensee/Applicant

RITA M. SHAW NOTARY PUBLIC STATE OF KANSAS My Appt. Exp.*O.3-17-00* 

FORM 35-4178 REV 2/01

# NEBRASKA LIQUOR CONTROL COMMISSION AFFIDAVIT OF NON PARTICIPATION 1000 1 × 2003

The undersigned individual acknowledges that he/she will have no interest, directly or indirectly, in the operation or profit of the business, as prescribed in Section §53.125(13) of the Liquor Control Act. Such individual shall not tend bar, make sales, serve patrons, stock shelves, write checks, sign invoices, represent themselves as owner or in any way participate in the day to day operations in any capacity. Undersigned will also be waived of filing fingerprint cards, however, has disclosed any violation(s) on the application.

Mary & Schwarz
Signature of Spouse

AITA M. SHAW MOTARY PUBLIC STATE OF KANSAS

The licensee/applicant understands that he/she is responsible for compliance with the conditions set out above, and that if such terms are violated, the Commission may cancel or revoke the license.

Print Name of Licensee/Applicant

FORM 35-4178 REV 2/01

# //

100 1 3 2003

## Carlos O'Kelly's Locations

Carlos O'Kelly's of Marion, Inc. 3320 Armar Drive Marion, IA 52402

Carlos O'Kelly's of Iowa City, Inc. 1411 S. Waterfront Iowa City, IA 52240

Carlos O'Kelly's of Topeka, Inc. 3425 S. Kansas Ave. Topeka, KS 55511

Carlos O'Kelly's of Fairfax, Inc. 9959 Main St. Fairfax, VA 22031

Carlos O'Kelly's of Fredericksburg, Inc. 2306 Plank Road Fredericksburg, VA 22401

Carlos O'Kelly's of Wichita, Inc. 7500 E. Kellogg Wichita, KS 67207

## Carlos O'Kelly's, Inc.

549 E. Coliseum Blvd. Ft. Wayne, IN 46805

707 W. 23<sup>rd</sup> Lawrence, KS 66046

2144 W. Hwy 50 Emporia, KS 66801

130 Ludwig Drive Fairview Heights, IL 62208

909 E. 30<sup>th</sup> Street Hutchinson, KS 67502

321 N. Roosevelt Burlington, IA 52601

4718 East Towne Blvd. Madison, WI 53704

2105 Verterans Parkway Bloomington, IL 61704

4455 N. 27<sup>th</sup> St. Lincoln, NE 68521 Carlos O'Kelly's of Decatur, Inc. 2930 N. Main St. Decatur, IL 62526

Carlos O'Kelly's of Manhattan, Inc. Manhattan Town Center #330 Manhattan, KS 66502

Carlos O'Kelly's of Stafford, Inc. 2860 Jefferson Davis Hwy. Stafford, VA 22554

Carlos O'Kelly's of Cascade, Inc. 4977 28<sup>th</sup> St. SE Grand Rapids, MI 49512

Carlos O'Kelly's of ICT, Inc. 527 S. Ridge Road Wichita, KS 67209

Carlos O'Kelly's of Salina, Inc. 2259 S. Ninth Salina, KS 67401

1790 Hamilton Blvd. Sioux City, IA 51103

1331 Flammang Drive Waterloo, IA 50702

714 West Lake Peoria, IL 61614

3709 West 41st St. Sioux Falls, SD 57106

1810 Diers Ave. Grand Island, NE 68803

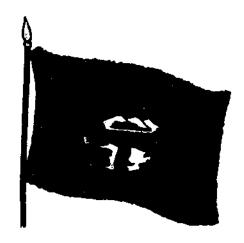
4100 S. Campbell Springfield, MO 65807

119 Third Avenue Kearney, NE 68847

3831 41<sup>st</sup> Ave. Drive Moline, IL 61265

1355 Associates Drive Dubuque, IA 52002

# STATE OF



NEBRASKA RECEIVED

0EC - 1 2002

CNTROL COMMISSION

Department of State Lincoln, Nebraska

United States of America, State of Nebraska

} 5S.

I, Scott Moore, Secretary of State of the State of Nebraska do hereby certify;

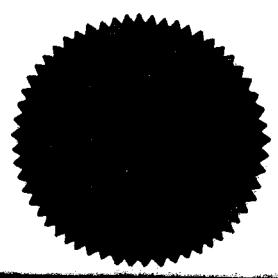
The attached is a true and correct copy of the Certificate of Authority to transact business in the State of Nebraska for

CARLOS O'KELLY'S, INC.

a Kansas corporation, as filed and recorded in this office on October 17, 1995.

I further certify that said corporation is hereby authorized to transact business in the State of Nebraska as a foreign corporation.

in Testimony Whereof,



I have hereunto set my hand and affixed the Great Seal of the State of Nebraska on October 17 in the year of our Lord, one thousand nine hundred and ninety-five.

SECRETARY OF STATE

451308